

DEPARTMENT OF HEALTH & HUMAN SERVICES
7500 Security Boulevard, Mail Stop S2-14-26
Centers for Medicare & Medicaid Services
Baltimore, Maryland 21244-1850
Center for Medicaid and State Operations
Disabled and Elderly Health Programs Group (DEHPG)

May 1 2002

Mr. Dennis Braddock
Secretary
Washington Department of Social and Health Services
Olympia, Washington 98504-5000

Dear Mr. Braddock:

We are very pleased to inform you that the Centers for Medicare & Medicaid Services is approving your request for two new home and community based services waivers under section 19 15(c) of the Social Security Act for individuals who are aged, blind or disabled living in their own home or a community residence. These waivers were assigned control numbers 0389 and 0390 and should be referenced in any future correspondence.

Specifically, you requested two waivers to provide services for individuals who live in their own/family homes and for individuals who live in community residences. Waiver services for individuals living in their home (Waiver 0389) include: Home Health Aide, Personal Care, Environmental Accessibility Adaptations, Skilled Nursing, Transportation, Specialized Medical Equipment and Supplies, Emergency Response Systems, Adult Day Care, Recipient Training, and Home-Delivered Meals. Waiver services for individuals living in community residences (Waiver 0390) include:

Skilled Nursing, Transportation, Specialized Medical Equipment and Supplies, Adult Residential Care (adult family homes, assisted living/enhanced adult residential care) and Recipient Training.

Based on assurances provided by you and your staff, we approve these waivers for a 3-year period effective May 1, 2002. With a satisfactory showing, the waivers may be renewed at the end of the 3-year period. The following estimates of unduplicated recipients and the average per capita cost of waiver services have been approved.

Year	<u>Unduplicated Recipients</u>	<u>Factor D</u>
<u>Waiver 0389</u>		
1	225	\$ 5,372
2	300	\$ 5,721
		\$ 6,059
3	300	

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Waiver 0390

1	814	\$ 1,425
2	1,467	\$ 1,567
3	1,467	\$ 1,735

This approval is subject to your agreement to serve no more individuals than those indicated above. Should you find that you want to serve a higher number of unduplicated recipients or need to modify data submitted such as the average length of stay for waiver individuals or make other alterations to this waiver, an amendment must be submitted for approval. With documentation of satisfactory performance and oversight, the waiver can be renewed at the end of the 3-year period.

We look forward to following your continued progress in building community-based alternatives to institutional care. If members of your staff have questions, please do not hesitate to contact Victoria Wallace of my staff on 410-786-3264.

Sincerely Yours,

Mary Jean Duckett
Director
Division of Benefits, Coverage and Payments

cc:

Mr. Robed Grauman Seattle Regional Office, CMS